

## Notice of Privacy Practices to Juneau Youth Services Clients

**This Notice Describes How Medical and Drug and Alcohol Information about You May Be Used And Disclosed And How You Can Get Access To This Information.**

**PLEASE REVIEW THIS CAREFULLY**

### **General Information:**

Information regarding your health care, including payment for health care, is protected by two federal laws: the Health Insurance Portability and Accountability Act of 1996 (HIPAA), 45 C.F.R. Parts 160 and 164, and the Confidentiality Law, 42 C.F.R. Part 2. Under these laws, Juneau Youth Services may not say to a person outside Juneau Youth Services that you attend our programs, nor may Juneau Youth Services disclose any information identifying you as an alcohol or drug treatment client, or any other protected health information except as permitted by federal law.

Juneau Youth Services must obtain your written consent before it can disclose information about you for payment purposes. For example, Juneau Youth Services must obtain your written consent before it can disclose information to your health insurer in order to be paid for services. Juneau Youth Services is also required to obtain your written consent before it can disclose information about you for marketing purposes, and Juneau Youth Services must obtain your written consent before disclosing any of your psychotherapy records. Generally, you must also sign a written consent before Juneau Youth Services can share information for treatment purposes or for health care operations. However, federal law permits Juneau Youth Services to disclose information *without* your written permission:

1. Pursuant to an agreement with a qualified service organization /business associate;
2. For research, audit or evaluations;
3. To report a crime committed on Juneau Youth Services premises or against Juneau Youth Services personnel;
4. To medical personnel in a medical emergency;
5. To appropriate authorities to report suspected child abuse or neglect;
6. As allowed by court order.

For example, Juneau Youth Services can disclose information without your consent to obtain legal or financial services, or to another medical facility to provide health care to you, as long as there is a qualified service organization/business associate agreement in place.

As part of treatment, payment and health care operations, Juneau Youth Services may also use or disclose your health information for the following purposes: to remind you of an appointment; to inform or recommend potential treatment alternatives or options; to inform you of health-related services that may be of interest to you; and to inform you about general health matters and our services. You have the right to opt out of receiving these communications.

Before Juneau Youth Services can use or disclose any information about your health in a manner which is not described above, it must first obtain your written consent allowing us to make the disclosure. Any such written consent may be revoked by you in writing.

### **Your Rights:**

Under HIPAA, you have the right to request restrictions on certain uses and disclosures of your health information. Juneau Youth Services is only required to agree to your request if you request a restriction on disclosures to your health plan for payment or health care operations purposes, and you pay for the services you receive from Juneau Youth Services yourself (out of pocket), unless the disclosure is otherwise required by law. We may condition this accommodation by asking you for information as to how payment will be handled or specification of an alternative address or other method of contact. We may end our accommodation to your request if payment arrangements are not honored. In any other situation, Juneau Youth Services is not required to agree to any restrictions you request, but if it does agree, then it is bounded by that agreement and may not use or disclose any information which you have requested restricted except as necessary in a medical emergency.

You have the right to request that we communicate with you by alternative means or at an alternative location. You must make this request in writing. Juneau Youth Services will accommodate reasonable requests and will not request an explanation from you. Under HIPAA, you have the right to inspect and receive a copy of your health information maintained by Juneau Youth Services, including electronic copies, except to the extent that the information contains psychotherapy notes or information compiled for use in a civil, criminal, or administrative proceeding or in other limited circumstances. If you request a copy of the information, we may charge a fee for the costs or copying, mailing, or other supplies associated with your request.

Under HIPAA, you also have the right, with some exceptions, to have Juneau Youth Services amend health care information maintained in Juneau Youth Services records, and to request and receive an accounting of disclosures of your health related information made by Juneau Youth Services during the six years prior to your request. You also have the right to receive a paper copy of this notice.

**Juneau Youth Services Duties:**

Juneau Youth Services is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. Juneau Youth Services is required by law to abide by the terms of this notice. Juneau Youth Services reserves the right to change the terms of this notice and make new notice provisions effective for all protected health information it maintains. Before we make a significant change in our policies, we will change our notice and post the new notice in the waiting area. Unless required by law, the revised notice will be effective on the new effective date of the Notice. You may request a copy of our notice at any time.

**Complaints and Reporting Violations:**

If you believe your privacy rights have been violated under HIPAA, you may file a complaint with the Juneau Youth Services Privacy Officer at (907) 523-6515 or via mail at Juneau Youth Services: PO Box 32839, Juneau, AK 99803. You may also file a complaint with the Secretary of United States Department of Health and Human Services of the Office for Civil Rights. You may also file a complaint with the Secretary of Health and Human Services at 200 Independence Avenue, S.W.; Washington, DC 20201, or reach the Secretary by phone at (202) 690-7000. There will be no retaliation for filing a complaint.

Violation of the Confidentiality Law by a program is a crime. Suspected violations of the Confidentiality Law may be reported to the United States District Attorney in the district where the violation occurs.

**Contact:**

For further information or if you have any questions about our privacy policy, please contact:  
 Privacy Officer - Juneau Youth Services: Phone (907) 523-6515

Your signature does not signify understanding, only that you have received a copy.

Client Signature (required for youth fourteen years old or older)	Printed Name	Date
Parent or Legal Guardian signature	Printed Name	Date